

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 02 1997 8:00am
Secretary of State

DOCUMENT # J15814

(3)

1. Corporation Name

MILLS MORTGAGE, INC.

Principal Place of Business

7779 STARKEY RD.
SEMINOLE FL 34647-4326

Mailing Address

7779 STARKEY RD.
SEMINOLE FL 33777-4346

3. Date Incorporated or Qualified
05/22/1986

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

21

Suite, Apt. #, etc.

City & State

23

Zip

Country

24

9. Name and Address of Current Registered Agent

MILLS, THOMAS P.
7779 STARKEY ROAD
SUITE 200
SEMINOLE FL 34647

2a. Mailing Address

26

Suite, Apt. #, etc.

City & State

27

Zip

Country

29

30

4. FEI Number
59-2674823

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE V
NAME DALY, LINDA E.
STREET ADDRESS 7779 STARKEY RD
CITY-ST-ZIP SEMINOLE FL ☐ DELETE

TITLE V
NAME DOUGHTERY, MICHAEL
STREET ADDRESS 7779 STARKEY RD
CITY-ST-ZIP SEMINOLE FL ☒ DELETE

TITLE V
NAME LONARDO, LORALYNNE
STREET ADDRESS 7779 STARKEY RD
CITY-ST-ZIP SEMINOLE FL 34647 ☐ DELETE

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE V
2.2 NAME Flagel, Theodore E
2.3 STREET ADDRESS 7779 Starkey Road
2.4 CITY-ST-ZIP Seminole, FL 33777 ☒ Change ☒ Addition

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME P
4.3 STREET ADDRESS Mills, Thomas P.
4.4 CITY-ST-ZIP 7779 Starkey Road
Seminole, FL 33777

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

THOMAS P. MILLS

4/24/97

(813) 398-7771

CR2E034 (9/96)